

MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, APRIL 7, 1829.

[No. 8.]

I.

Cases of Neuralgia, or painful Affections of Nerves.

By JOHN C. WARREN, M.D.

NEURALGIA OF THE LOWER EXTREMITIES.

Painful Affection of the Sciatic Nerve from Cold and Moisture.

CAPT. E., aged 40, being exposed to the wet during a long continuance of bad weather at sea, became affected with a severe pain in the back, and in the upper and back part of the thigh. These pains occurred in paroxysms, were of a darting character, and extended down the limb to the *outer ankle*, where the pain was peculiarly severe, and often accompanied with swelling. He had suffered greatly from it about six months, when I saw him first.

Having blistered him without advantage, I put him on a mercurial course, and kept him under the mercurial influence six weeks without any good effect. Then he took Hemlock, to the amount of twenty grains a day, for some weeks, and afterwards the Carbonate of Iron, freely. During all these remedies, external applications were constantly preserved, especially a very liberal use of leeches. He was,

however, not relieved by them, was wholly confined to the house, and could not walk the room without producing a paroxysm,—sometimes in the hip, sometimes in the knee and in the outside of the foot, where the pains were peculiarly severe.

He had been about four months under my care, when the following course was adopted :—

1. Caustic potass was applied, so as to make a deep issue, three inches long, and an inch and a half wide, over the *peroneal nerve*, just in front of where it turns round the neck of the fibula to pass downwards ; in the situation recommended by Cotunnio. At the same time, a permanent blister was established on the outside of the foot and outer ankle.

2. He took a pill of three grains of extract of Stramonium, three times a day, and a pill of three grains of extract of Belladonna, with two of Opium, at night. This course, with a proper regimen and a due use of purgatives, was continued eight weeks, with slight intermissions whenever the head and stomach were disturbed. At the end of this time, the pain left him ; he slowly recovered his strength, resumed his business, and he had been well for five years when I last saw him.

Pain in the Sciatic Nerve, cured by Nature.

A gentleman, having occasion to change his ordinary dress for a thinner, was obliged to walk some distance at the time, when a sudden change of weather occurred, and he was exposed to the chill of a brisk north-east wind. In the night, he was attacked with violent darting pains in the left thigh, extending to the knee. These pains occurring at intervals, at length reached the outside of the foot; and after this they usually began in the thigh, and passed through the knee, to the outer ankle. For the space of a year he was dreadfully tormented,—a part of the time confined to the house, and generally incapacitated from walking. I recommended to him the application of a cauterium over the sciatic nerve, and another over the peroneal nerve. He assented; but delaying the operation a short time for convenience, the pain disappeared, and has never returned.

He had employed various frictions, fomentations, and tight bandage, when I saw him. The bandages aggravated the pain at the time, and rendered it more frequent. The credit of this cure must be wholly attributed to nature.

Obstinate Affection of the Sciatic Nerve, relieved by hot Fomentation of Narcotic Plants.

To a young lady, affected with pain in the course of the right sciatic nerve, without any obvious cause, I gave the Sulphate of Iron, in doses of three grains, three or four times a day, for twelve weeks. This, with rest, purgatives, and a restricted regi-

men, relieved her. The occurrence of domestic misfortunes compelling her to extraordinary efforts, a relapse was produced. For six months she was affected, especially in the night, with distressing pain through the whole length of the limb, principally on the outside, and especially near the outer ankle. The disease resisted all the narcotics externally applied,—and internally, a long course of Arsenic; the Sulphate of Quinine; Cinchona in powder; and great quantities of Carbonate of Iron. Blisters affected her severely, but were continued through the whole course, with mitigation of the neuralgia, though at times she begged she might be permitted to die without further torment from them. At last, when I was at a loss to devise new medicines suited to her case, I proposed a hot fomentation of stramonium leaves, with a portion of Tincture of Opium. This hot application gave distinct relief. She continued it for six weeks, taking at the same time an infusion of Gentian, and was then so much relieved that I advised her to omit all remedies and go into the country. With much apprehension, on account of her disabled state, she followed this advice, and after remaining in the country a month, came home quite well. Whether she continue so is very uncertain; for a chill from the air, or sitting on a cold seat, causes uneasiness in the sciatic nerve.

In this, and some other cases, the powder and watery solution of opium, applied to open blisters, disappointed my expectations entirely. I do not recollect any case where this form of application was successful.

Painful Affection of the Crural Nerve from an Abscess.

About ten years ago, in consequence of a fever, a married lady, of full habit, had a swelling of the inguinal glands, terminating in abscess, which discharged very great quantities of matter. From this disease she recovered, after three years' confinement, and enjoyed good health for a number of years. In consequence of domestic calamities, her health became impaired, and she was again confined for a long time. On her recovery she became fleshy, and soon after was attacked with a pain in the groin, the former seat of disease. It occurred first at the catamenial period, and lasted through that period only; but gradually became so constant as to incapacitate her for all the enjoyments and duties of life. The pain was in the groin, exactly on the crural nerve, and shot down the thigh in the direction of the branches of this nerve. There was often swelling of the groin, and sometimes of the foot; though the limb, on the whole, was emaciated and flaccid. Leeches, bathings, blisters, etc., afforded some relief, but nothing permanent. Nor were bleeding, the warm bath, change of air, preparations of iron, and other remedies, more effectual. At length she obtained great relief by long perseverance in a most abstemious diet.

Fatal Neuralgia of the Peroneal Nerve.

A lady, of delicate constitution, received an injury of the ankle, which terminated in a painful affection of the peroneal nerve. The pain extended through the whole limb, but was most severe from the knee to the outside

of the foot, and especially so in the latter situation. The pain was in paroxysms, and of a darting kind. It occurred frequently during the day. The patient gradually lost her appetite, flesh, and strength. The foot became drawn up by permanent muscular contraction; the knee also was contracted. In this state of things I was consulted, and finding that all remedies had failed,—that even very large doses of opium had but little effect, I recommended the excision of the peroneal nerve at the knee, and in case this operation failed, amputation; at the same time expressing my apprehensions that the habit of pain was so confirmed as to be incurable. A portion of the peroneal nerve was removed, without any permanent alleviation, and the patient soon after fell a victim to sufferings of three years' duration.

Painful Affection and Convulsions from the Wound of a Needle.

In the year 1819, a young lady, patient of Dr. Gorham, was wounded by a needle in the sole of the foot, near its outer edge. She was of an irritable or nervous constitution; health not very good. She had a sharp pain at the moment; this disappearing, she walked about as usual. In a week after, she began to experience a pain in the part, shooting to the toes. This recurred daily, with increasing violence, till the limb above became affected with these shooting pains. Dr. Gorham made various applications to the part, and cut it open; still the paroxysms increased, and at length produced an occasional spasm of the muscles. He now requested my advice. I found the young lady in a feeble, emaciated state; ex-

tremely excitable, and apparently very unhappy. I advised Dr. G. to cut across the flesh, which had been the seat of the wound; allow it to bleed freely, and to produce a suppuration by preventing the uniting process. This was done; but no permanent relief having resulted, I then advised him to use a cautery, and produce an eschar of all the wounded part. Neither this, nor any other remedy, gave relief. The pains continued; the spasms increased till they resulted in convulsions,—as in the case related by Dr. Pierson,—and wasting away, she expired about three years after the accident.

Painful and fatal Affection of the Nerve in one side of a Toe, from the Pressure of a Corn.

Some time since, Dr. — requested me to visit with him a gentleman who was affected with paroxysms of excruciating pain in one of the toes, arising apparently from pressure on the nerve of one side by a corn. He had suffered so much in the night as to deprive him of sleep for some time, and when the paroxysms occurred in the day, he was unfitted for business. I advised Dr. — to remove the corn. This was done; but no relief being obtained, he was directed to dress the wound with an ointment containing a quarter part extract of Belladonna, and to take this medicine internally. A decided constitutional effect was produced, but no relief from his pain. I then advised him to have his toe cut off, but before this was done, he had an intermission of pain, which, having since relaxed at times, has encouraged him to keep the toe. Probably the habit of pain is so formed, that the re-

moval of the toe would not cure him now. His paroxysms frequently alternate with a disordered state of the digestive organs.

I have been informed lately that this patient, after having long suffered very excruciating pain, determined to have his toe amputated. It was accordingly removed. A few days after, he was affected with sudden prostration of strength, and in a short time expired in a very unexpected manner.

Had the toe been removed when this was first proposed, I have no doubt it would have relieved the pain. When the habit of pain has been long formed, it extends much beyond the first seat of pain, and gets out of the reach of amputation or any other remedy.

Neuralgia of a Branch of the Plantar Nerve, followed by Convulsions, and cured by Operation.

The following severe case, cured by operation, is full of interest and instruction. Were the writer a person of ordinary stamp, I should not have availed myself of his permission to publish this letter; although I do not consider it any discredit to a young surgeon to include a small nerve with an artery in a deep wound in the foot; and yet, at the same time, concur with him in the suggestion that there is too great an apprehension from hemorrhage subsequent to operations. Such an accident as this can have no influence on the reputation of a practitioner, whose claims to reputation are founded on solid merit, and in whose skill I cannot better express my confidence, than by saying that there is no surgeon in this vicinity to whose hands I would

more readily submit my own case, if I had occasion for surgical aid.

Salem, Feb. 4, 1828.

MY DEAR SIR,—The minutes of the following case you are at liberty to make any use of which you please, and to connect with it my name,—although it is obvious the symptoms could only arise from including a nerve in the ligature of a small vessel, which I was led to tie from the officious caution into which a dread of hemorrhage betrays an inexperienced operator. I have copied from my case-book as much as would put you in possession of the important facts, and you are perfectly at liberty to curtail or abridge.

June 6th, 1821, I operated on the foot of a girl, 16 years of age. She had an ulcer on the sole of the left foot, over the metatarsal bone of the left toe. There was originally in this place a hard, painful tumor, which was attempted to be destroyed eleven months since, by enoratic dressings, which have been applied every few weeks since, and give great pain. The general health has become somewhat impaired by confinement and anxiety. The ulcer has a hard margin, no appearance of pus or granulations, and a thin, ichorous discharge. With a free incision I removed the skin for half an inch round the margin, together with the cellular membrane down to the plantar fascia, some fibres of which were probably divided. About four ounces of blood were lost, and ligatures were applied to two small bleeding arteries. Immediately upon the operation, the patient complained of great pain and distress in the left *hypochondrium* and *epigastrium*, and in less than half an

hour there came on severe spasms of the trunk and inferior extremities. Dressings and ligatures were removed, and the arteries bled about an ounce. This was the commencement of the severe neuralgia with which this young woman has since been afflicted. The first attack lasted nine days; then an interval of ease, of a week's duration, ensued; then a recurrence, for about the same period; then a longer interval of ease. The intervals between the paroxysms continued to grow longer, till at the end of about three years the disposition to return seemed extinguished, and there followed a period of fifteen months, during which time there was no return of spasms. Eighteen months since the spasms returned as severely as ever, in consequence of being thrown from a chaise and receiving a severe blow upon the head. These paroxysms returned at irregular intervals until you saw her last summer. After the operation which you performed, she remained tolerably quiet for a fortnight; she then had an attack of the spasms, which were as violent as ever, and lasted several days; since that time she has been free from spasmodic disease, and her general health has improved. The foot healed kindly, and, on the whole, there is every reason to expect that the nervous affection will no more return.

During the paroxysms, the pain usually commenced in the foot, and rapidly extended to other parts, as the head, stomach, neck, and jaws,—which parts would then be affected with rigidity and spasms,—and *invariably* fixed itself in the left *hypochondrium*, until after the operation of last

summer, after which time the pain never attacked this part. There has always been, and now exists, a tenderness of the sole of the foot and inside of the leg and thigh. As to the mode in which the paroxysms came on, they were generally to be apprehended when the system was disturbed by any functional disorder, but sometimes came on during sleep and without warning. There were occasionally some symptoms of hysteria, but the mind was always uncommonly resolute and free from anxiety or foreboding. The remedies used in the case were administered principally under the care of Drs. HOLYOKE, Jr. and OLIVER, and the entire class of antispasmodics had, in the course of the various paroxysms, a fair trial. Camphor, musk, valerian, assafoetida, castor, even in very large dose, and administered in a variety of ways, had no decided effects. Cicuta, hyoscyamus, belladonna, and stramonium, produced faintness, without much benefit. Bleeding was always useful as a palliative, but was sometimes abstained from on account of the intense pain produced by the puncture of the lancet, and which lasted for some time, although she was bled and had teeth extracted without any extraordinary pain, at times when the spasms were not present. Carbonate of Iron and Fowler's Solution, continued in full doses for a long time, produced no benefit. The only two articles which would sensibly diminish the violence of the muscular contraction and remove pain, were Alcohol and Opium, and whenever these were given in doses to produce drowsiness or intoxication, decided relief was invariably obtained.

These remedies were sometimes abstained from and the disease left to exhaust itself, on account of the excessive irritability of the stomach, which followed their use. There was commonly poor appetite, and headach, and at one period a dimness of sight, which required convex glasses.

Faithfully and affectionately
yours, A. L. PEIRSON.

Dr. Peirson having sent for me to examine this case, I went to Salem, and in company with him immediately visited the patient. An opportunity was presented of witnessing a paroxysm of the disease. The patient, a fine young woman, was seized with the spasmodic affection about the time of our arrival. The convulsions were truly horrible, and presented the aspect of the most terrible case of tetanus. When the violence of the convulsions had subsided, I made an incision in the sole of the foot, behind the interstice of the fourth and fifth toe, and by dissection exposed the branch of the internal plantar nerve, going to the fourth and fifth toe. An inch of this nerve was laid bare, and the sensation of the patient showed it to be the true seat of the disease. This portion was cut out. After the operation she had one, and only one, spasmodic period, and is now, at the distance of eighteen months from the operation, in perfect health.

II.

Atrocious Murders in Edinburgh.

(Continued from p. 102.)

THE examination proceeded.—He had been acquainted with Burke about a twelvemonth; M'Dougal had lived with Burke then as his

wife ; witness lived in the West Port, not far from Burke ; was in a public house in the West Port on the forenoon of the 31st of October, when they had a gill ; he asked witness to go down to his house, to see the *shot* he had got to take to the doctor's ; he said he had taken an old woman off the street, and wished witness to go down and see her, and see what they were doing ; understood by the word *shot*, that he was going to murder the woman ; he went to Burke's house, and found there was a strange man and woman (their name was Gray), the old woman, and Helen M'Dougal ; the old woman was washing her short gown ; it was white and red striped. [Identified the bed-gown.] Witness remained in the house for about five minutes, and then went home ; was in Connaway's between eight and nine o'clock on Hallowe'en night. There were Connaway and his wife, William Burke, John Broggan, and another lad, whom he did not know, the old woman, Helen M'Dougal, and witness's wife : they had some drink there ; Burke, Broggan, and the lad, went out ; but witness remained later and went into Burke's, leaving the old woman in Connaway's ; was not long there till Burke himself and the old woman came in ; she was so much the worse for drink as hardly to be able to keep her feet ; there was some dancing in Connaway's ; at this time he did not think that any harm was to happen to the old woman that night ; when in Burke's, some words took place between him and witness, and blows ensued ; he asked what had brought him there, and he replied that he had been invited by M'Dougal ; while they were struggling, the old woman ran twice into the passage, and called out either murder or po-

lice ; Helen M'Dougal brought her back both times ; while witness and Burke were struggling, he (Hare) pushed her over a stool ; she got up so as to rest upon her elbow, but was so drunk as not to be able to regain her feet ; she was always calling on Burke to quit fighting, and he did so ; having stood for some minutes on the floor, Burke stood stride legs over her, and laid himself down above her—his breast being on her head ; she gave a cry, and then moaned a little ; he put one hand on her nose and mouth, and the other under her chin, and stopped her breathing ; this was continued for ten or fifteen minutes ; he never spoke while this was going on ; after he had risen from above her, he put his arm upon her mouth for some minutes ; she appeared quite dead ; witness was sitting all the while on a chair ; he stripped the body of the clothes, put it into a corner, doubling it up, and covering it with straw ; witness's wife and M'Dougal, when they heard the first screech of the old woman, ran into the passage, and did not come in again until the body was covered with the straw ; before this, they were lying in the bed, and witness sat at the head of the bed ; did not observe blood on the floor, or on the woman's face, at the time ; did not observe the woman in the passage cry—but nobody came to the door during the time. Burke had not been above the woman a minute or two, when the women started out of bed and ran to the door ; none of them attempted to save or assist the old woman, and such could not have happened without his seeing it ; saw them come again, and Burke go out, when he was absent a few minutes ; the women asked no questions, and he made no remark ;

the women went to their beds again; neither asked for the woman Docherty; when Burke returned, he brought the doctor's man with him—a person who lived a little down the West Port. Burke wished the doctor's man to look at the body, but he said it would do well enough; to get a box and put it into it; the women were in the bed while the man was in the house, but he could not tell whether they were awake or not; witness fell asleep himself; he was rather the worse of liquor, but he knew well enough what he was about; he awoke about seven o'clock in the morning; he found himself on a chair, with his head on the bed; the women were in the bed, and a lad named John Broggan, who was lying beyond his aunt; Burke was at the fire-side; he and his wife got up and went home, when they found Gray and his wife there; Burke called witness into Rymer's shop, and wished him to go with him to Surgeons'-square, which witness agreed to do after he fed the swine; they went to Surgeons' square, where Burke inquired for a box, but they did not get one; he said he bespoke one from Mr. Rymer's shop-boy; this box was brought into the passage by the porter (M'Culloch), but there was nobody in the house when they went in; they took the box in, and waited at the door till Burke came, who said, "You are worth little that have not put it into the box;" witness assisted to put the body into the box; the porter pressed it down, and observing some of the hair over the side of the box put it down inside, saying it was "a bad thing to have it hanging out." The box was roped, and the porter in-

structed to carry it to Surgeons' square; witness and Burke accompanied him; and met the women in the High Schoolyards; could not say whether Burke or the porter went in first; witness accompanied them; the body was put into a cellar, and witness and Burke proceeded to Dr. Knox's, at Newington, but did not go into his house; Mr. Paterson, who was to pay the money, took them into a public-house, where he got change, and paid the porter 5s., Burke 2l. 7s. 6d., and witness 2l. 7s. 6d.; understood that 5l. more was to be paid on Monday; saw the women both in going to and returning from Newington, but neither of them went into the public-house.

Cross-examined by Mr. Cockburn.—Had been a boatman on the canal; had also had a horse and cart and sold fish; had been concerned in furnishing medical lecturers with subjects; was never concerned in carrying any other bodies to surgeons than that of the old woman, but had seen it done; had never been concerned in raising bodies; was asked how often he had seen it done?—Declined answering the question. Was this of the old woman the only one in which he was concerned?—Declined to answer. Was murder committed in his house last October?—Declined answering the question. Understood that the use of the term *shot* was used by Burke as meaning a person for a subject, in order to murder them; heard him use it when he did not mean to murder; but understood that to be his meaning at that time. First thought that there would be mischief when he saw Burke stand over the old woman. They had quarrelled, and

therefore had no thought till he saw Burke in that situation ; saw the body of the old woman in the police-office ; he then said he had never seen the body of the old woman before, and denied that he had seen the woman alive ; it was on the Sunday when he saw it, and denied it then. " Have you had several transactions with Dr. Knox or his assistant ? " — Declines to answer the question. Burke had received money from Dr. Knox, but witness never did, nor from any of his assistants. Burke received 5*l.* for the body from Dr. Knox, and they were to receive more on Monday ; Dr. Knox's man said they were to get 5*l.* more ; thinks it was Burke who paid the porter, but is not sure whether it was Burke or Mr. Paterson ; Burke threw two notes across the table along with the change ; is certain that Mr. Paterson did not pay the money to him, though he folded up the two notes and divided the silver ; had never any quarrels with Burke about the payments, nor no quarrel with him about money matters ; witness pushed the woman over a stool, and she was so drunk she could not rise ; before that, she had gone to the door, and called " police ; " when Burke got on the old woman, she gave a shriek, which could be heard some short distance ; at that time did not hear any one call for the police ; Burke and he were fighting before the woman shrieked ; Broggan and the two women were in bed ; he was sitting at the side of the bed, and Burke was at the fire ; thinks that it was ten minutes before Burke had murdered the old woman ; never attempted to prevent him ; but remained in the house all the time ; sat by and looked at the

transaction ; did not go next day to the police and inform them of it ; but, when examined by the police, he denied all knowledge of it. [Hare was removed in the custody of the police.]

(To be continued.)

III.

REPORTS OF CASES IN PRIVATE PRACTICE.

A Case of Croup.

Communicated for the Boston Medical and Surgical Journal,

By ABRAHAM R. THOMPSON, M.D.

J. S., a very sprightly boy, aged four years, had a cold during the middle of February, with some cough and running at the nose ; his general health good. On Saturday, February 21st, he sat up in a wet sink, looking out of the window to see his father shovel snow,* till he got chilled, and his mother observed him to look blue and shiver. In the evening he became hoarse and was restless, with dry nostrils. On Sabbath morning complained of headach and heat, and got a dose of senna, followed with castor oil, which purged freely in the afternoon. Towards midnight he breathed so bad, that a medical gentleman was called, who administered an emetic, with some relief. On Monday his mother tried to get down squills and liquorice, and at evening he took goose oil and garlic tea, and had a liniment of goose oil and garlic rubbed over the windpipe, &c. On Tuesday morning a blister was applied to the breast. The above report was made to me by the mother when for the first time I saw him, Tuesday, Feb. 24, at 12 o'clock. His nose was dry, and his whole countenance illuminated with that preternatural light which

* I think that state of atmosphere which snow produces, is frequently the cause of croup.

is so striking in true croup. His pulse had the genuine hammer stroke. I had no doubt of very active inflammation of the internal coat of the windpipe, and rather thought that effusion had already taken place; and of course that the membrane had begun to form. I opened the external jugular vein, and drew from a large orifice twelve ounces of blood. Slight faintness followed, with decided remission of the symptoms. After waiting nearly an hour, (till reaction took place, and with it a recurrence of symptoms of obstructed windpipe,) I gave four grains of Sub. Sulph. Hyd. Flav., which vomited freely, with great relief during its action, which continued till evening, when restlessness, heat and hard breathing returned, and in tossing himself about he lost about four ounces more of blood, from the same orifice in the jugular. At 9 he took three grains of Calomel, and at 11 quarter of a grain of Tart. Antimony, dissolved in water; and from this time until the following Sabbath evening he continued to take the same quantity of Cal. and Tart. alternately, every two hours, drinking freely of water, and nothing else. During Wednesday and Thursday the disease went on, constantly increasing, so that at 10 o'clock, on Thursday evening, the symptoms had reached the most aggravated degree: great difficulty of breathing; "the act of coughing without the sound"; the head thrown back; frequent changing of the position of the body; pulse rapid and tumultuous, and great distress of countenance. At 12 o'clock a terrible suffocative struggle came on, and a fit of convulsive coughing terminated in the expectoration of a considerable piece of broken membrane; and from this time shreds of membrane, with frothy and bloody mucus, continued to be expectorated more or less for seven or eight days. The bowels kept open sufficiently; but notwithstanding the quantity of

calomel, besides antimony, given from Tuesday evening till the following Sabbath evening—and not less than 120 grains of calomel had been given during that time—yet neither purging nor sore mouth came on. A slight oedema of the face and feet was noticed. A few doses of cold pressed castor oil, and ipecacuanha, alternately, completed the medical treatment, and the little patient is now rapidly recovering, on a mild nourishing diet.

On this case I submit a few reflections.

First. On Tuesday noon, when I first saw this patient, the disease had been going on for three days, and I was strongly impressed with the belief that effusion had taken place into the windpipe. Yet I bled freely from the jugular, and followed bleeding with other means most likely to combat inflammation, and to promote healthy secretion. The doctrine I wish to inculcate is, that even when we think effusion may have taken place, we are justified in using vigorous means against further inflammation,—such as bleeding, emetics, antimonials, &c. &c.

Secondly. On Thursday evening, when I thought the disease would prove fatal to my little patient, I had a conversation with his father about opening the windpipe. With my views I could not advise the operation. My reading and experience were both against it, nor was my mind changed by reading the recent report of the Auburn case. For a careful examination of that report satisfied me that the recovery of the patient at Auburn was not to be credited to the operation. If, however, the parent had been very anxious to have the operation done, I think I might have done it; and if it had been done, and the child had recovered, then an undeserved importance would have been attached to

the operation, and a false rule of practice encouraged. But it was not done, and the child recovered; and the doctrine I wish to inculcate under this reflection is, that in croup the operation of opening the windpipe is not a good rule of practice.

Thirdly. The operation of tracheotomy is very valuable in its proper place. I have seen it performed successfully by Dr. Walker, of this town, for the removal of a foreign body from the windpipe; and that same gentleman has also performed the same operation unsuccessfully for croup,—so have I, and so have other gentlemen in Europe and America. The different result of these operations arises from the difference of cutting into a healthy windpipe and a diseased one; and this is the practical doctrine to be inculcated by this third reflection.

Fourthly. Croup is generally a fatal disease. It kills the patient either at once, by terrible inflammatory, spasmodic violence, or more commonly by effusion of lymph, forming a membrane along the windpipe, and extending down into the ramifications of the windpipe, into the lungs. But now and then an escape is effected, in the first instance by resolution, or in the second by the breaking up of the adherent membrane, and throwing it out by expectoration. In the course of twenty years' practice, I have seen a great many cases of croup, and I have seen several cases of the first class and two of the last; and the best practical advice I can give, is to bleed freely from the jugular, or leech freely, and give calomel and antimony—watchfully, indeed, but liberally and steadily. This practice will be most likely to break up the disease at its onset, by resolution, or aid the recuperative efforts of the system to throw it off in its protracted form by expectoration.

Charlestown, March 24, 1829.

Sulphuric Acid in Psoriasis Inveterata.

Communicated for the Boston Medical and Surgical Journal,

By JAMES W. PERKINS.

HAVING noticed in No. 1, Vol. 2, Boston Medical and Surgical Journal, a case of Psoriasis Inveterata successfully treated by Arsenical Solution, I am induced to communicate a case of the same disease cured by the internal use of strong Sulphuric Acid, after the disease had resisted a thorough trial of the Arsenical Solution.

Miss A., of a good constitution, enjoyed good health up to her 22d year, when she was attacked with a cutaneous disease, which commenced upon the inferior extremities, in separate irregular patches, which became confluent and gradually extended over the body in defiance of the various external applications to which she resorted for relief.

The Arsenical Solution was at length prescribed, and she persevered in its use, gradually increasing the dose for many weeks without any apparent benefit.

I visited the patient in company with the family physician. A fair trial having been made of the Solution, it was concluded to try the efficacy of Sulph. Acid in large doses.

She began with four drops three times a day in sweetened water, and increased two drops every day, until the dose was augmented to 50 drops; when the disease began rapidly to give way. The acid was continued in doses of 40 drops five weeks longer, at the end of which period the cutaneous disease was completely removed, and the integuments soon regained their natural color and appearance.

The patient's bowels were kept open during the exhibition of the acid, by pills composed of G. Gamboge and Tart. Antimony, and the scales moistened daily by a solution of Slippery Elm.

Windham, N.H. March 18, 1829.

BOSTON, TUESDAY, APRIL 7, 1829.

DEATH OF DR. GORHAM.

THE following is a more particular account of the morbid appearances discovered in the examination of Dr. Gorham.

Post-mortem Examination, twenty-seven hours after Death, made by Dr. Hayward, in presence of Drs. Jackson, Channing, Bigelow, Ware, and Stevenson.

The thorax only was examined. The body retained its plumpness, and the adipose matter under the skin was unusually thick. The sternum, with the cartilages of the ribs, being removed, the left side of the thorax seemed occupied in front principally by the heart. This arose not from the magnitude of the heart, but from the diminished size of the lungs on that side, and from a quantity of adipose matter covering the pericardium, and connected with a similar matter spread over the mediastinum. The lungs on this side adhered to the surrounding parts, to the ribs, diaphragm, and pericardium. The adhesion was formed by coagulable lymph recently effused. This adhesion was quite strong in the posterior and inferior parts. It was wanting at the side over a small space, where a reddish serum was effused to the quantity of an ounce or more. The pleura pulmonalis in most parts, when the lymph was removed, was found to have retained its polish, and seemed to have partaken less in the inflammatory action than the pleura costalis. The portion of the cellular, or rather adipose covering of the pericardium, to which the pleura costalis adhered, had a very slight and superficial blush, having partaken of the inflammation in the slightest degree.

Both lobes of the left lung were diseased throughout, but most at the posterior and inferior parts. At the apex there was a small, distinct por-

tion, in size equal to a large English walnut, which was quite solid and of a red color; properly hepatized and containing no air. The parts surrounding this were similarly changed, but in a less degree, and some frothy and bloody serum flowed from them. Lower down in the superior lobe and in the anterior half, the lung was less diseased, crepitated very slightly, and poured out upon incision more frothy fluid. The posterior part of this lobe and all the inferior lobe were different in their appearance. These parts resembled the spleen as much as diseased lung ever resembles liver; that is, they did not crepitate, they were destitute of frothy fluid when divided by the knife, and they were not indurated. Likewise their color was dark, like that of the spleen. The very lowest part had a *leathery* feel when handled. If the pleura had been detached from it, and it had been presented to an anatomist, he would not easily have detected, by its texture, from what part of the body it had been taken. It may, perhaps, be compared, except as to color, to a piece of lung half boiled and then gently pressed. The part thus described could not be said to be inflamed. It seemed to have been compressed, and the air to be so excluded.

On the right side the lung adhered very generally by cellular bands, evidently not of recent formation. The lung itself was quite healthy.

The pericardium contained less than an ounce of water, and was healthy; as also was the heart.

To the foregoing account, furnished by Dr. Jackson, we add the following note by Dr. Hayward.

The account of the morbid appearances seems to me to be perfectly accurate, and the comparison of the aspect of the lower lobe of the lung to boiled lung I think quite a happy one. There was only one thing which has occurred to me in addition, and that was the thickness of this lobe, which was not greater,

I should say, than the thick part of common tripe. It was in a collapsed state; the vessels and cells had lost their elasticity to such a degree, as to be nearly, if not quite obliterated. The lobe was not engorged with blood, and the disease in it seemed, as it struck me, to have arisen from the morbid state of the pleura.

This circumstance may not appear to others to be of any consequence, and it may not be; but I thought it very unusual, at the same time that it showed, to my mind at least, that the pleura was the primary seat of disease.

The precise situation and extent of the inflammation was ascertained by the stethoscope, as appears by the note which here follows. It may be proper to state, that on the first day of his indisposition he sent for Dr. Warren, almost immediately after he was seized. At that time he had pain in the head, back, and limbs; symptoms of fever; a disposition to drowsiness; and constant vomiting. The most effectual mode of interrupting the course of the disease seemed to be by an emetic; and he was directly ordered a drachm of ipecacuanha, thirty grains of submuriate of quicksilver, with three of the tartrate of antimony, divided into three powders,—one of which vomited him powerfully. Soon after this prescription, Dr. W. meeting Dr. Jackson, informed him that Dr. Gorham was ill, and that unless relieved by the emetic, he feared his symptoms might become alarming. Immediately after the emetic, the stomach being still unsettled, he began to take purgative pills of submur. of quicksilver, aloes, and colocynth, and took in the whole fifteen grains of each. At the second visit, which was within a few hours of the first, it was proposed to

bleed him. The grounds on which this remedy was suggested were, that there appeared a tendency to inflammation; and although at that time there were not present the signs of inflammation of any organ, such symptoms might arise. To this he decidedly objected; saying that he had such a cold as this in the autumn, and then recovered without venesection, and even kept abroad. Dr. W. did not assent to this remark, and assured him it would have been impossible for him to have left the house in the state he actually was. He consented to use the warm bath, followed directly by pills of three grains of calomel and one grain of opium, and a large number of leeches to the head, the part in which he most suffered at that time. It was on the next morning that he had some pleuritic symptoms, and was directly bled to fainting. It seems remarkable that he had not the least suspicion of a pleuritic affection till informed of it. Dr. Jackson saw him on the second day of the pleuritic attack, with Dr. W., and called again in a few hours in the absence of the latter, to whom he addressed this note.

In Dr. Gorham's study.

Perhaps you have not received a note from me which will explain my being here. I have been examining him as fully as I could without annoying very much. I infer that the pleura costalis and pulmonalis of the lower lobe is inflamed, and that it has spread into the lung more than I thought in the morning; and that even the upper lobe partakes, in a slight degree, of the inflammation, or at least has its vessels much filled. In breathing, he endeavors to avoid disturbing the lower part of the left thorax, and when he does disturb it

he has the acute pain. He seems to move the ribs up and down, but to resist the expansion of them.

Half past 11.—His pulse have been rather less than 120, and less, feeble all the time I have been with him.

The physicians who attended Dr. Gorham have a melancholy satisfaction from the reflection that the nature of his disease was understood almost the moment it had formed, and that active remedies were immediately administered, and in every case with sensible relief from suffering; although the disease proved too powerful to be overcome by the medical art.

Besides the physicians above named, he had almost constantly with him some other. Dr. Brown attended him on the first night of the pleuritic attack, Dr. Stevenson on the second, and Dr. Ware on the third. The two latter were his pupils.

Funeral of Dr. Gorham.

THE funeral of Dr. Gorham was attended on Monday, March 30th. A meeting of the Boston Medical Association was called on Sunday evening previous, which was more fully attended than any other meeting we have ever seen, at which the following preamble and resolutions, offered by Dr. Ware, were unanimously adopted.

The Members of the Boston Medical Association, solemnly impressed by that dispensation of Providence by which their greatly beloved and respected associate, JOHN GORHAM, M.D., has been so suddenly removed from this life, feel it to be their duty to offer to the family of the deceased some testimony of sympathy with them on their loss, and to the public some proof of respect for his character; therefore,

Resolved, That his professional brethren, in common with his bereaved family, his numerous friends, and the community at large, deeply deplore the loss which has been sustained in the death of Dr. Gorham, and are desirous of testifying their affectionate regard for his many virtues, and their respect for his professional worth.

Resolved, That the Secretary be directed to express to the family of the deceased, the sympathy of the Profession with them in their irreparable loss; and to request permission to pay the last tribute of respect to his memory by a public attendance on his funeral, and by the delivery of an address on that occasion by one of his professional brethren.

A committee was appointed to communicate to the family of Dr. Gorham the wishes of the Association, who soon after reported that they were ready to comply with the request of the Association; and Dr. Jackson was chosen to deliver the proposed address. At 4 o'clock on Monday afternoon, after prayers by Rev. Mr. Emerson, a procession was formed at the house of Dr. G. and proceeded to Brattle Street Church, his usual place of worship. The hearse was followed, after the immediate relations, by the members of the Boston Medical Association; then by other Fellows of the Massachusetts Medical Society; Dr. Gorham's classmates in College; Officers of Harvard University, and a great number of his patients and friends. The Church was already crowded, except the pews reserved for those in the procession. Rev. Mr. Palfrey, the Pastor of Brattle Street Church, being absent, the devotional services at the Church were performed by Rev. Dr. Channing. After a dirge

had been sung by the choir, a prayer was offered by Dr. Channing, and Dr. Jackson delivered a very interesting address, in which he noticed the leading circumstances of the life and character of Dr. G. in a simplicity and elegance of style, admirably suited both to its subject and its author. The services at the Church were closed with a prayer and a hymn, after which the procession followed the body to St. Paul's Church, in the cemetery of which it was deposited.

It was the first design of his friends to have only a private funeral; but the spontaneous expression of a desire to exhibit an affectionate regard for his memory, by a participation in these last mournful services, was so general and so strong, that his family were induced to forego their own feelings to gratify those of his numerous friends.

THE week before last, we intimated the probability of an increase of pulmonary affections from the humid atmosphere of the dissolving snows. This has been verified. Catarrhal inflammation of the lungs, and peripneumony, commonly called lung fever here, have been of frequent occurrence. Many severe cases of pleurisy have also presented themselves. Sore throat, or cynanche tonsillaris, is prevalent; and the whole community appear to be affected with cough. So far as we can judge there has been a considerable increase of disease, the last fourteen days. An intelligent gentleman, travelling homewards from the South, where he had passed the winter, stated, that landing about three weeks since on the shores of New-

England, he immediately experienced the chilling influence of the region of snows, and became affected with a catarrh which has continued from that time. The snows of the middle states had of course disappeared. Those of this section of the country have now in a great measure dissolved from the influence of the milder atmosphere and the rains of last week. Our climate changed on the 28th of March. On that day the previously invariable frost did not occur as usual in the night. The pulmonary cases alluded to above have not been very fatal: but the present is the season of danger, particularly for children; and we must prepare for the worst. Bleeding has not, so far as we have seen, been distinctly beneficial in these cases. From emetics and blisters, we have seen valuable effects.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending March 25, at noon.

March 20.	Mary Jane Trowbridge,	22 yrs.
	Susan Haskins,	31
21.	Edwin T. Starr,	8 mo.
	Martha J. L. Vialle,	2 1-4 y.
	Lucy Fenno,	65
	Sarah Sewall,	28
22.	Jerusha Alley,	37
	Joseph Davis,	82
	Louisa Frye,	23
	Sarah Jane Duffee,	4
	William C. Bancroft,	16
	Benjamin White,	62
23.	Charles Davies Cotton,	18
	James Richardson,	28
24.	John F. Truman,	43
	John Jacobs,	51
	Samuel B. Thacher,	12 mo.
	Andrew McDonald,	33 yrs.
	Benjamin Sylvester,	33
	Ann Horton,	88
	Mary Jones,	45
25.	William Sprague Keen,	4 mo.
	Caroline Abbot,	21 yrs.
	Lemuel Lincoln,	5 w.

Childbed, 1—consumption, 6—croup, 2—debility, 1—inflammation, 1—inflammation in the bowels, 1—inflammation in the brain, 1—infantile, 2—intemperance, 2—lung fever, 2—old age, 2—unknown, 3. Males, 13—females, 11. Stillborn, 2. Total, 26.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.

2. Operative Dental Surgery.

3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinae; hinc mille malorum occasiones.*—Baglivi XIII. March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 189, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins & Co.—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.